REGULAR BOARD MEETING PACKET



BOARD OF COMMISSIONERS

Board Chair –Tom Herrin, Secretary – Kim Olive, Commissioner – Craig Coppock, Commissioner – Wes McMahan & Commissioner-Laura Richardson

March 30, 2022 @ 3:30 PM

Join Zoom Meeting: https://myarborhealth.zoom.us/j/86367233822

Meeting ID: 863 6723 3822

One tap mobile: +12532158782,,86367233822#

Dial: +1 253 215 8782



Mossyrock Clinic 745 WILLIAMS STREET 360-983-8990

Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital Morton Hospital Morton Clinic 521 ADAMS AVENUE 531 ADAMS AVENUE 360-496-5112

Morton Clinic 360-496-5145

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Old Business

New Business

Superintendent Report







LEWIS COUNTY HOSPITAL DISTRICT NO. 1 REGULAR BOARD OF COMMISSIONERS' MEETING March 30, 2022 at 3:30 p.m. ZOOM

https://myarborhealth.zoom.us/j/86367233822

Meeting ID: 863 6723 3822 One tap mobile: +12532158782,,86367233822#

Dial: +1 253 215 8782

Mission Statement

To foster trust and nurture a healthy community.

<u>Vision Statement</u> To provide accessible, quality healthcare.

AGENDA	PAGE	TIME
Call to Order		
Roll Call		
Reading of the Mission & Vision Statement		3:30 pm
Approval or Amendment of Agenda		
Conflicts of Interest		
Comments and Remarks		3:35 pm
Commissioners		
Audience		
Executive Session- <i>RCW</i> 70.41.200 & <i>RCW</i> 70.41.205		3:40 pm
Medical Privileging-Medical Staff Coordinator Cramer (5 minutes)	5	
 Quality Improvement Oversight Report-Commissioner Coppock & Sara Williamson (5 		
minutes)		
Department Spotlight		3:50 pm
Marketing/Communications	6	
Board Committee Reports		
Hospital Foundation Report-Committee Chair-Commissioner Richardson	16	4:00 pm
Finance Committee Report-Committee Chair-Commissioner McMahan	18	4:05 pm
Consent Agenda (Action)		4:15 pm
Approval of Minutes:		
o February 21, 2022, Special Board Meeting	23	
o February 23, 2022, Regular Board Meeting	26	
o March 9, 2022, QIO Committee Meeting	33	
 March 16, 2022, Finance Committee Meeting 	37	
o March 21, 2022, Special Board Meeting	41	
 Warrants & EFTs in the amount of \$3,914,787.84 dated February 2022 	44	
Resolution 22-10-Appointing DNV Accreditation-Antimicrobial Stewardship Program	46	
Manager		
 To appoint the Antimicrobial Stewardship Program Manager. 		

 Resolution 22-11-Approving the NW Momentum Accountable Care Organization (ACO)-Year 2 Escrow Funding 	48	
 To approve the escrow funding for the NW Momentum ACO from operating cash. 		
	51	+ 1
Resolution 22-12-Declaring to Surplus or Dispose of Certain Property To the Control of the	31	
o To approve liquidation of items beyond their useful life.		4
 Approve Documents Pending Board Approval and Ratification 03.30.22 	53	
o To provide board oversight for document management in Lucidoc.		
Old Business		
 Resolution 22-13-Adopting the 2022 Compliance Workplan (Action) To adopt the 2022 Compliance Workplan. 	56	4:20 pm
Redistricting Discussion		4:30 pm
o To determine if we are going to retain commissioner subdistricts.		
Incident Command Update		4:45 pm
CNO/CQO Williamson will provide a verbal COVID 19 update, which will		1
include Proclamation updates.		
PDC Filing Reminder		4:50 pm
To complete prior to April 1, 2022.		ne o pin
Break		4:55 pm
New Business		1
Bond & Levy Discussion	62	5:00 pm
Resolution 22-14-Approving to engage Bond Counsel & Financial Consultant		1
(Action)		
 To approve engaging bond counsel and a financial consultant. 		
Resolution 22-15-Approving Budget Amendment-Cerner (EHR) Transition to WA	64	5:15 pm
Domain (Action)		1
o To approve amending the 2022 budget by approving the transition to Cerner's		
WA Domain.		
Superintendent Report	70	5:25 pm
Meeting Summary & Evaluation		5:40 pm
Next Board Meeting Dates and Times		•
• Special Board Meeting-April 18, 2022 @ 3:30 PM (ZOOM)		
Regular Board Meeting-April 27, 2022 @ 3:30 PM (ZOOM)		
Next Committee Meeting Dates and Times		
• Finance Committee Meeting-April 20, 2022 @ 12:00 PM (ZOOM)		
Adjournment		5:45 pm
Taget to the second of the sec		F



MEDICAL STAFF PRIVILEGING

The below providers are requesting appointment to the Arbor Health Medical Staff. All files have been reviewed for Quality Data, active state license, any malpractice claims, current liability insurance, peer references, all hospital affiliations, work history, National Practitioner Data Bank reports, sanctions reports, Department of Health complaints, Washington State Patrol background check and have been reviewed by the credentialing and medical executive committees including the starred items below. The credentialing and medical executive committees have recommended the following for approval.

INITIAL APPOINTMENTS-1

Radiology Consulting Privileges

• Ryan Frederiksen, MD (Radia Inc.)

REAPPOINTMENTS-11

Radiology Consulting Privileges

- James Bell, MD (Radia)
- Lawrence Bennett, MD (Radia)
- Keith Bernstein, MD (Radia)
- Samuel Boyton, MD (Radia)
- William Brinkman, MD (Radia)
- Alan Chan, MD (Radia)
- Sean Conus, MD (Radia)

Telestroke/Neurology Consulting Privileges

- Sergey Akopov, MD (Providence Health &Services)
- George Lopez, MD (Providence Health & Services)
- Ruth Treat, MD (Providence Health & Services)
- Hanbing Wang, MD (Providence Health & Services)

Marketing & Communications

We speak Super Hero, fluently We're Kid Friendly & Kid Focused

Each of our clinics has providers who are fluent in a multitudes of kid-speak.

Call for an appointment for a checkup.

Morton Clinic: 360.496.5145 Mossyrock Clinic: 360.983.8990 Randle Clinic: 360.497.3333



FOR MORE INFORMATION: Diane Markham, Public Information Officer

(360) 870-6747

dmarkham@MyArborHealth.org

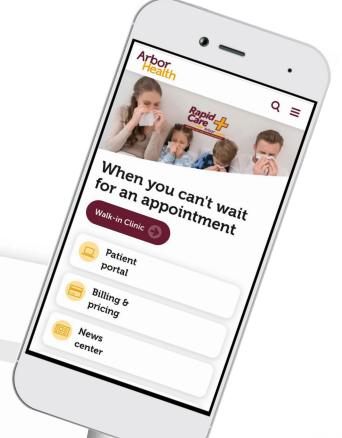
ARBOR HEALTH RELAXES VISITOR RESTRICTIONS

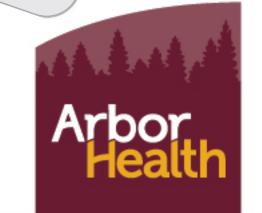
OR HEALTH RELAXES VISITOR RESTRICTIONS

MORTON, Wash. —Arbor Health — Morton Hospital and its three primary care clinics—

have according on the vicitor restrictions Randle Clinic, Morton Clinic and Mossyrock Clinic—have eased up on the visitor restrictions Randle Clinic, Morton Clinic and Mossyrock Clinic—have eased up on the visitor restrictions have been lessened to the restrictions have been lessened.

Exceptions to the following may be permitted at all locations for sensitive scenarios such as increptions to the following may be permitted at all locations for sensitive scenarios such as sensitive scenarios such as a sensitive scenarios such as sensitive scenarios scenarios such as sensitive scenarios scenarios such as sensitive scenarios scenari







Advancing the Arbor Health vision and mission



Public Education and Alindshare





Traditional Media Sources

4 news publications

Arbor Health & Life publication

2 Online news publications

2 Radio Stations

5 Billboards

Direct mail



Digital Communications

MyArborHealth.org website

- **E-Newsletters**
- **Medical Library**

Social Media

- Facebook
- Instagram
- LinkedIn

Online news publications

Google Business Profiles

Video Productions



On-site and Internal Marketing

Signage

Posters

Digital Displays

Arbor Health Happenings

All Printed Materials



Additional Avenues

Centralia College Arbor Health Education Center

SW Washington Fair handwashing stations

Packwood Mountain Festival Fun Run

Mossyrock Festivals

New Mover Cards

Youth sports



Marketing Resources Allocation

Tier 1, 60% of our resources:

Service lines with timely focus or service lines that we have competitive advantage.

Tier 2, 30% of our resources:

Profitability—services that make a significant impact on our bottom line.

Tier 3, 10% of our resources:

Service lines that provide downstream revenue or areas of future opportunity.



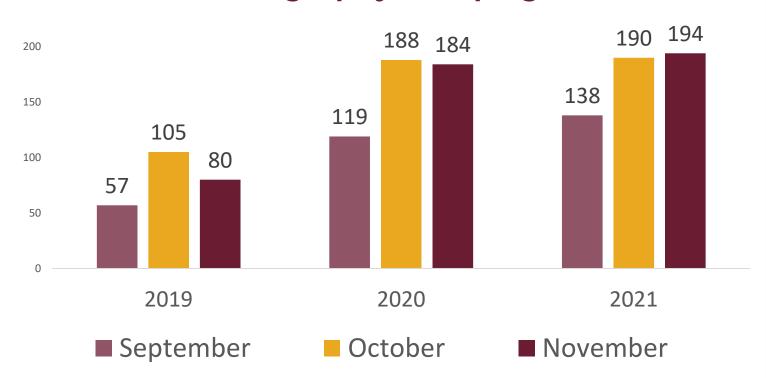
2022 Marketing Plan	Print Ads	Social Media	Health & Life pub.	Lewis Talk Article	Billboards	Radio	Digital	Internal	Direct Mail	Letters
ervice Line Promotions / Initiatives										
Fier 1										
rimary Care										
Primary Care-with emphasis on new physician, Famiola Puga, MDIntroduce new doctor to the community through media (and community events in non-COVID conditions). Tactics: Print ads, digital pay-per click ads, social media (organic posts and paid ads), internal marketing, Health & Life	PUGA 2-May, 3-June, 4 July Primary 2-May, 1 June	May, June, July, Aug	May, Sept, Nov	July		June (primary care get ready for school)	June & July	June (Primary Care)	July	
Heart MonthUtilize the national publicity on "Heart Health" in February to promote our primary care providers. Tactics: Print ads, Social Media	2-Feb	February								
Annual/intro Medicare visitsEncourage Medicare patients to schedule their initial and, then, annual visit. Tactics: Health & Life article, snail mail letters to Medicare patients, educate the physicians	2-Apr	April	May					May	March	
lew Specialists, Clinics and Service Lines										
Rapid Care Clinic-Introduce new service to the community, initially through media sources but to focus on digital search as well as inclusion of Rapid Care graphic in other marketing endeavors	2-Feb, 4 March	Feb, March	May, Sept, Nov			Feb, March	March, April	March	When running 4 days	
Packwood Clinic-Arbor Health plans to open a new primary care clinic in Packwood in 2022. When this occurs, we will activiate marketing efforts										
Orthopedic and Podiatry surgery. Continued focus on new doctors/service lines to the community. Tactics: Print ads, billboards, digital pay-per click ads, SEO, social media (organic posts and paid ads), internal marketing	April, May	April, May	May, Sept	Peresko- February Williams- March	April-June (featuring all surgeons)	April, May	April, May	April, May	?	
ransitional Care Rehab (Swing Bed)										
Educate community on availability of TCR and the advantages over out-of-town skilled nursing facility. Tactics: Print ads, billboards, direct mail, digital pay-per click ads, social media (organic posts and paid ads), radio, internal marketing, Health & Life. Marketing video production and promotion.	4-Jan Partnered with Rehab in Nov & Dec	January, Nov, Dec	Nov	?	Jan-March	Jan, Dec	Nov., Dec	January	?	
Tier 2										
lehabilitation Services PT/OT/Speech/Stroke specialty										
Educate community on services available at Arbor Health—Tactics: Print ads, billboards, direct mail, digital pay-per click ads, social media (organic posts and paid ads), radio, internal marketing	Partnered with Transitional Care in Nov & Dec	Nov, Dec	May, Nov	?		Nov, Dec	Nov, Dec	Nov, Dec	Nov	
reast Health										
Breast Health Campaign - Promote early cancer detection through 3-D digital mammogram										

Measurements

Mammography was always a part of our marketing effort, but we seriously kicked up our mammography campaign in September and October 2020 and then repeated the same effort in 2021.



Mammography Campaign





Three-month combined revenue

2019 \$96,762

250

2020 \$167,836

2021 \$176,983

BOARD COMMITTEE REPORTS



LEWIS COUNTY HOSPITAL DISTRICT NO. 1 Arbor Health Foundation Meeting March 8, 2022, In person/ZOOM

Mission Statement

To raise funds and provide services that will support the viability and long-term goals of the Lewis County Hospital District No. 1. This includes, but is not limited to, taking a leadership role in maintaining and improving community pride and confidence in all aspects of the hospital's health care system.

Attendance: Marc Fisher, Caro Johnson, Linda Herrin, Jeannine Walker, Jessica Scogin, Lynn Bishop, Laura Richardson, Julie Taylor, Katelin Forrest, Martha Wright, Julie Taylor

Excused: Betty Jurey, Ali Draper

Guest: Shannon Kelly

Call to Order by President Marc Fisher at 12:05

The president read the mission statement

February 2022 treasurer report were approved. Caro Johnson/Jeannine Walker February 2022 minutes were approved. Jeannine Walker/Linda Herrin

Guest Speaker Sara Williamson

She informed the Board about Diversion, which at times requires that ambulances be diverted to other facilities. The hospital ER has one trauma room and four treatment rooms. The ER staff includes one RN, one technician and one doctor. When the ER can't be fully staffed or equipment is down, it is normal for ambulances to be diverted to other facilities. 4th Quarter of 2021 the hospital had 97 hours of diversion. A suicidal or mental health patience requires a full-time staff member to be present and can leave the ER short staffed. Sara also reported that Adventure Medics were doing most of the transports from the hospital.



Administrators Report-Julie Taylor

Julie reported that the Rapid Care Clinic has been busy and has received good feedback. This past Saturday the clinic saw 12 patiences and was able to relieve the strain on the ER. The hospital is looking at opening the gift shop and cafeteria at some point in the future.

Directors Report: -Jessica Scogin

The Mommy shower is now being called the New Parent Fair and will be held at the grade school gym March 26, 2022. The fire department will be there to demonstrate infant CPR and the police department will show how to install car seats. Jamie Fleming will be doing crafts and Amanda Seal will be taking pictures. A representative from Centralia College may be there to take about classes that can benefit young mothers. There will be a Parents as Teachers presentation and Paula Baker will be providing food. There will be door prizes for new parents which will allow us to collect email addresses. Free diapers will be given away and Sandra Zacher will be making prizes to give away. Each family present will receive a gift bag. The hospital will be doing the marketing for this project and Dr. Acosta will be there to answer questions.

FOMP will be doing a Spring Bazaar March 31 and April 1, 2022 and Jessica asked for volunteers to man the booth of sales items from the gift shop. Marc and Jeannine have agreed to man the booth.

The Ladies Brunch will be held in May and volunteers are still needed for the gift shop. The gift shop may open to the public at some point in the future.

Old Business: none

New Business:

Conflict of interest and discrimination forms still need to be returned by a few members.

Ali Draper has resigned as President and Marc Fisher has been named president.

Meeting adjourned 12:45

Lewis County Hospital District No. 1

Board Financial Summary

February 28, 2022



Pg 18 of the Board Packet

Lewis County Hospital District No. 1 Income Statement February, 2022

	CURRENT		MONTH			Y	EAR TO D	ATE		
Pr Yr Month	% Var	\$ Var	Budget	Actual		Actual	Budget	\$ Var	% Var	Actual
523,572	-11%	(73,307)	672,223	598,916	Inpatient Revenue	1,636,414	1,459,475	176,939	12%	1,451,290
2,268,477	8%	219,299	2,706,425	2,925,724	Outpatient Revenue	5,863,693	5,909,809	(46,116)	-1%	4,643,473
276,783	-24%	(121,725)	510,381	388,656	Clinic Revenue	773,845	1,006,910	(233,065)	-23%	628,068
3,068,831	1%	24,268	3,889,028	3,913,297	Gross Patient Revenues	8,273,952	8,376,194	(102,242)	-1%	6,722,830
1,070,832	12%	163,163	1,355,580	1,192,417	Contractual Allowances	2,422,153	2,750,057	327,904	12%	2,315,718
32,232	-604%	(15,561)	2,575	18,137	Charity Care	64,769	5,117	(59,652)	-1166%	63,849
64,306	72%	38,074	53,091	15,016	Bad Debt	10,321	107,017	96,696	90%	44,561
1,167,370	13%	185,676	1,411,246	1,225,570	Deductions from Revenue	2,497,243	2,862,191	364,948	13%	2,424,129
, ,		,	, ,				, ,			
1,901,462	8%	209,944	2,477,783	2,687,727	Net Patient Service Rev	5,776,709	5,514,003	262,706	5%	4,298,702
62.0%	-7.8%	-5.0%	63.7%	68.7%	NPSR %	69.8%	65.8%	-4.0%	-6.1%	63.9%
35,506	-32%	(26,527)	81,900	55,373	Other Operating Revenue	136,587	163,801	(27,214)	-17%	158,148
1,936,968	7%	183,417	2,559,683	2,743,100	Net Operating Revenue	5,913,296	5,677,804	235,492	4%	4,456,850
					Operating Expenses					
1,455,685	11%	189,698	1,796,857	1,607,159	Salaries & Wages	3,259,461	3,601,316	341,855	9%	2,791,789
353.360	7%	32,516	437,005	404,489	Benefits	819.581	861,567	41,986	5%	732,809
96,749	14%	18,803	138,797	119,995	Professional Fees	197,212	276,882	79,670	29%	225,073
185,488	22%	45,820	207,515	161,696	Supplies	441,119	412,775	(28,343)	-7%	310,540
252,506	9%	35,853	401,664	365,811	Purchase Services	779,599	823,742	44,143	5%	608,506
36,479	13%	5,700	43,869	38,169	Utilities	115,441	88,167	(27,275)	-31%	80,259
19,425	1%	174	22,271	22,096	Insurance	45,328	44,542	(786)	-2%	38,850
31,579	33%	21.686	65,701	44.015	Other Expenses	88,036	137.047	49,011	36%	69,813
2,431,271	11%	350,249	3,113,679	2,763,431	EBDITA Expenses	5,745,777	6,246,038	500,261	8%	4,857,640
					·					
(494,304)	-96%	533,666	(553,996)	(20,331)	EBDITA	167,519	(568,234)	735,753	-129%	(400,790)
-25.5%	96.6%	-20.9%	-21.6%	-0.7%	EBDITA %	2.8%	-10.0%	-12.8%	128.3%	-9.0%
					Capital Cost					
113,025	1%	646	100,832	100,187	Depreciation	210,514	200,507	(10,007)	-5%	207,852
35,756	2%	566	33,161	32,596	Interest Cost	65,235	66,323	1,088	2%	71,554
2,580,052	11%	351,460	3,247,673	2,896,213	Operating Expenses	6,021,525	6,512,868	491,342	8%	5,137,046
(643,084)	-78%	534,877	(687,990)	(153,113)	Operating Income / (Loss)	(108,230)	(835,064)	726,834	-87%	(680,195)
-33.2%		001,011	-26.9%	-5.6%	Operating Margin %	-1.8%	-14.7%	720,001	01.70	-15.3%
00.270	,		20.070	0.070	Operating Margin 70	1.570	11.70			10.070
					Non Onematica Auticita					
128,933	10%	14,265	141,132	155,397	Non Operating Activity Non-Op Revenue	291,623	282,264	9,358	3%	254,934
9,228	-66%	(2,352)		5,918	•	291,623 10,539	,	(3,407)	-48%	,
119,706	-66% 9%		3,566	149,479	Non-Op Expenses	281,084	7,132	5,952	-48% 2%	14,698
119,706	9%	11,913	137,566	149,479	Net Non Operating Activity	201,084	275,132	5,952	2%	240,236
(523,379)	-99%	546,790	(550,424)	(3,634)	Net Income / (Loss)	172,854	(559,931)	732,786	-131%	(439,959)
-27.0%)		-21.5%	-0.1%	Net Income Margin %	2.9%	-9.9%			-9.9%

Lewis County Public Hospital District No. 1 Balance Sheet

	February, 2022		Prior-Year	Incr/(Decr)
	Current Month	Prior-Month	end	From PrYr
Assets				
Current Assets:				
Cash	\$ 10,707,272	11,637,167	12,295,636	(1,588,364)
Total Accounts Receivable	7,827,686	7,705,229	6,780,509	1,047,177
Reserve Allowances	(3,188,203)	(3,124,675)	(2,675,536)	(512,667)
Net Patient Accounts Receivable	4,639,483	4,580,553	4,104,973	534,510
Taxes Receivable	310,857	181,584	44,337	266,521
Estimated 3rd Party Receivables	56,300	71,277	71,277	(14,977)
Prepaid Expenses	313,789	256,597	299,720	14,069
Inventory	289,443	287,978	283,994	5,449
Funds in Trust	1,603,890	1,593,539	1,593,539	10,350
Other Current Assets	191,518	197,278	192,811	(1,293)
Total Current Assets	18,112,553	18,805,974	18,886,288	(773,735)
Property, Buildings and Equipment	34,744,468	34,736,482	34,687,777	56,692
Less Accumulated Depreciation	(23,395,547)	(23,294,057)	(23,182,426)	(213,121)
Net Property, Plant, & Equipment	11,348,921	11,442,425	11,505,351	(156,429)
Total Assets	\$ 29,461,474	30,248,399	30,391,639	(930,165)
Liabilities				
Current Liabilities:				
Accounts Payable	832,848	942,967	1,637,156	(804,307)
Accrued Payroll and Related Liabilities	1,306,459	1,066,212	925,898	380,560
Accrued Vacation	835,693	788,350	784,018	51,674
Third Party Cost Settlement	4,680,254	5,644,837	5,671,570	(991,316)
Interest Payable	59,286	29,624	(37)	59,323
Current Maturities - Debt	1,544,174	1,544,174	1,544,174	0
Unearned Revenue	2,040,101	2,040,101	1,787,417	252,684
Other Payables	12,187	12,187	12,187	. 0
Current Liabilities	11,311,001	12,068,452	12,362,383	(1,051,382)
Total Notes Payable	1,340,144	1,364,680	1,389,173	(49,030)
Capital Lease	(0)	(0)	(0)	0
Net Bond Payable	5,026,841	5,028,145	5,029,448	(2,607)
Total Long Term Liabilities	6,366,985	6,392,825	6,418,621	(51,637)
Total Liabilities	17,677,986	18,461,277	18,781,004	(1,103,019)
General Fund Balance	11,577,235	11,577,235	11,577,235	0
Net Gain (Loss)	206,253	209,887	33,399	172,854
Fund Balance	11,783,488	11,787,122	11,610,634	172,854
Total Liabilities And Fund Balance	\$ 29,461,474	30,248,399	30,391,639	(930,165)

Arbor Health Cash Flow Statement For the Month Ending February 2022

	MTD	YTD
Cash Flows from Operating Activites		_
Net Income	(3,634)	206,253
Adjustments to reconcile net income to net	(, ,	,
cash provided by operating activities		
Decrease/(Increase) in Net Patient Accounts receivable	(58,929)	(534,510)
Decrease/(Increase) in Taxes receivable	(129,274)	(255,651)
Decrease/(Increase) in Est 3rd Party Receivable	14,977	0
Decrease/(Increase) in Prepaid expenses	(57,192)	(14,069)
Decrease/(Increase) in Inventories	(1,465)	(5,449)
Decrease in Other Current Assets	5,760	1,292
Increase/(Decrease) in Accrued payroll liabilities	287,589	432,235
Increase/(Decrease) in 3rd Party cost stlmt liabilities	(964,583)	(991,316)
Increase/(Decrease) in Accounts payable	(110,119)	(539,437)
Increase/(Decrease) in Interest payable	29,662	35,287
Depreciation expense	101,490	213,121
Net Cash Flow from Operations	(885,718)	(1,452,244)
Cash Flows from Investing Activities		
Cash paid for		
Purchases of Fixed assets	(7,986)	(56,691)
Net Cash Flow from (used) in Investing Activities	(7,986)	(56,691)
Cash Flows from Financing Activities		
Cash paid for		
Additions to long-term debt	0	0
Principal payments of long-term liabilities	(25,840)	•
		(236,636)
Net Cash Flow from (used) in Financing Activities	(25,840)	(236,636)
Not Ingragas (Degragas) in Cook	(010 E44)	(4 745 574)
Net Increase (Decrease) in Cash	(919,544)	(1,745,571)
Cash at Beginning of Period		\$ 14,056,733
Cash at End of Period	d \$ 12,311,162	\$ 12,311,162

CONSENT AGENDA



LEWIS COUNTY HOSPITAL DISTRICT NO. 1 SPECIAL BOARD OF COMMISSIONERS' MEETING February 21, 2022 at 3:30 p.m.

ZOOM

https://myarborhealth.zoom.us/j/88234386418

Meeting ID: 882 3438 6418

One tap mobile: +12532158782,,88234386418#

Dial: +1 253 215 8782

Mission Statement To foster trust and nurture a healthy community.

<u>Vision Statement</u> To provide accessible, quality healthcare.

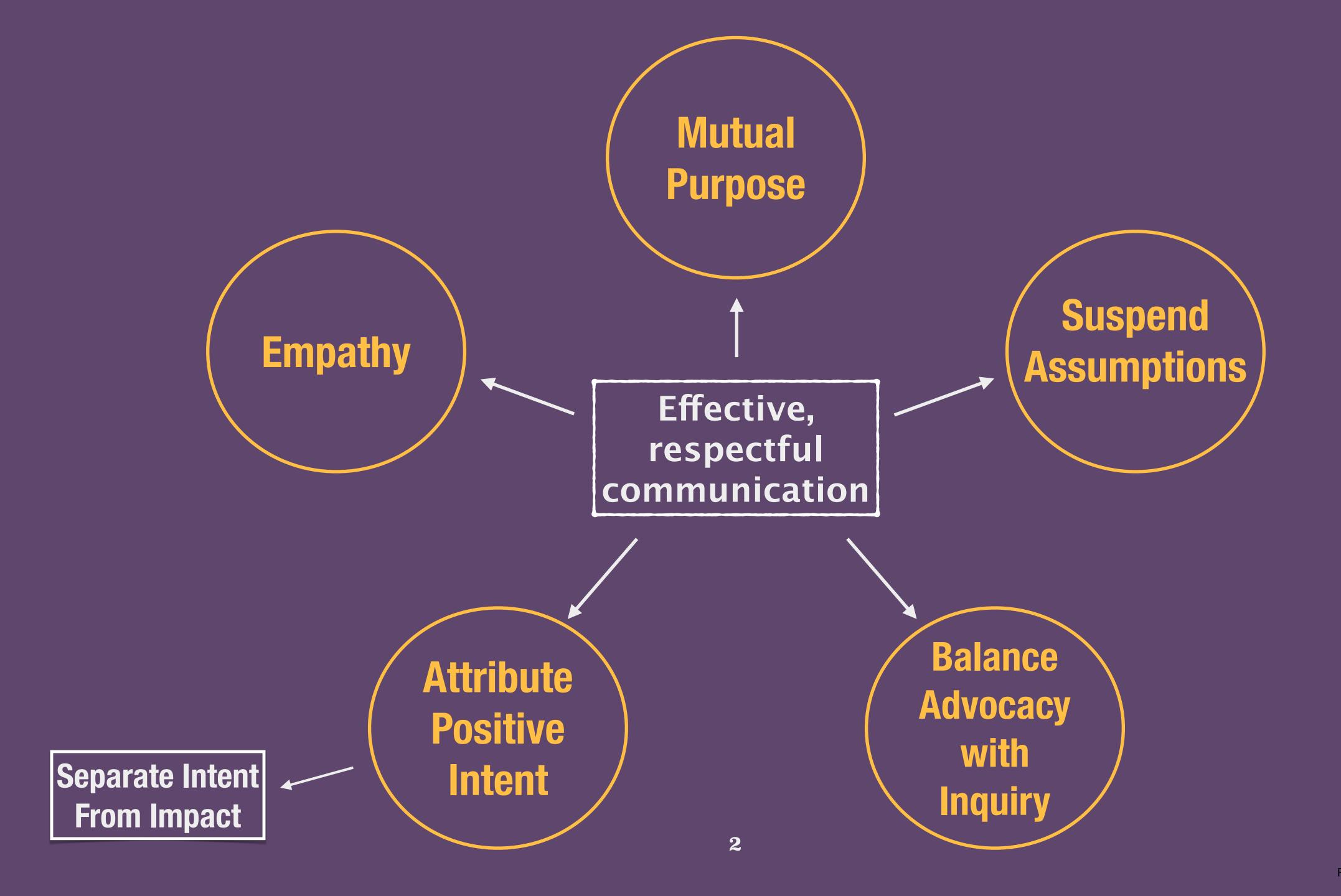
AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
Call to Order	Board Chair Herrin called the			
Roll Call	meeting via Zoom to order at 3:30			
Reading the Mission	p.m.			
& Vision Statements				
	Commissioners present:			
	⊠ Kim Olive, Secretary			
	□ Laura Richardson			
	⊠ Wes McMahan			
	⊠ Craig Coppock			
	Others present:			
	☐ Leianne Everett, Superintendent			
	⊠ Kurt O'Brien			
Conflicts of Interest	Board Chair Herrin asked the Board	None noted.		
	to state any conflicts of interest with			
	today's agenda.			
Reading of the Notice	Board Chair Herrin read the special			
of the Special	board meeting notice.			
Meeting				
New Business	Superintendent Everett introduced			
 Developing a 	Kurt O'Brien from Kurt O'Brien			
High Functioning	Consulting. Kurt provided			
& Effective	educational background and			
Board	experience to date.			
Break	Board Chair Herrin called for a 5-			
	minute break at 4:36 p.m. The			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE

	Board returned to open session at 4:41 p.m.			
Developing a High Functioning & Effective Board Continued	Kurt provided insight of the purpose of the Board, along with how does the Board work and what does that look like. Kurt tasked the Board to select an area from the handout to focus on.	Review handout and select an area to focus on.	Board of Commissioners	03.21.22 Special Board Meeting
Adjournment	Secretary Olive moved and Commissioner McMahan seconded to adjourned at 5:31 p.m. The motion passed unanimously.			

Respectfully submitted,

Kim Olive, Secretary Date





LEWIS COUNTY HOSPITAL DISTRICT NO. 1 REGULAR BOARD OF COMMISSIONERS' MEETING February 23, 2022 at 3:30 p.m. ZOOM

https://myarborhealth.zoom.us/j/86512740552

Meeting ID: 865 1274 0552

One tap mobile: +12532158782,,86512740552#

Dial: +1 253 215 8782

Mission Statement To foster trust and nurture a healthy community.

<u>Vision Statement</u> To provide accessible, quality healthcare.

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
Call to Order	Board Chair Herrin called the			
Roll Call	meeting to order via Zoom at 3:30			
Reading the Mission	p.m.			
& Vision Statements				
	Commissioners present:			
	☑ Tom Herrin, Board Chair			
	⊠ Kim Olive, Secretary			
	□ Craig Coppock			
	□ Laura Richardson			
	Others present:			
	Assistant			
	⊠ Sara Williamson, CNO/CQO			
	Manager			
	☑ Jim Frey, CIO			
	Coordinator			
	☑ Richard Boggess, CFO			
	☐ Diane Markham, Marketing &			
	Communications Manager			
	⊠ Buddy Rose, Reporter			

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	 ☑ Spencer Hargett, Compliance Officer ☑ Shannon Kelly, CHRO ☑ Julie Allen, Quality Data Analyst ☑ Julie Taylor, Ancillary Services Director ☑ Jared Van Kirk, Principal, Foster Garvey PC ☑ Clint Scogin, Controller ☑ Matthew Ellsworth, Executive Director, AWPHD ☑ Dr. Mark Hansen, Chief of Staff 			
	Board Chair Herrin noted the chat function has been disabled and the meeting will not be recorded.			
Approval or Amendment of Agenda		Commissioner Coppock made a motion to approve the agenda. Secretary Olive seconded and the motion passed unanimously.		
Conflicts of Interest	Board Chair Herrin asked the Board to state any conflicts of interest with today's agenda.	None noted.		
Comments and Remarks	Commissioners: Secretary Olive thanked the staff of 2021 and those that remain serving Arbor Health in 2022. Commissioner McMahan also expressed appreciation for all staff, as well as thanks to Kurt O'Brien for the education received this week. Audience: Marketing & Communications Manager Markham shared comments received on social media praising the Rapid Care Clinic since it opened this month.			

Executive Session-RCW 70.41.200, RCW 70.41.205, RCW 42.30.140 (4) & RCW 42.30.110 (g)	Executive Session began at 3:38 p.m. for one hour to discuss RCW 70.41.200, RCW 70.41.205, RCW 42.30.140 (4) & RCW 42.30.110 (g). The Board returned to open session at 3:43 p.m. Board Chair Herrin noted no decisions were made in Executive Session. Initial Appointments- Arbor Health 1. Robert Revels, CRNA (Anesthesia Privileges) Radiology Consulting Privileges 1. Manal Schoellerman, MD (Radiology Privileges) 2. Michael Starkey, MD (Radiology Privileges) Telestroke/Neurology Consulting Privileges 1. Michael Chen, MD (Consulting Telestroke/Neurology Privileges) 2. Wiliam Lou, MD (Consulting Telestroke/Neurology Privileges) Reappointments- Radiology Consulting Privileges 1. David Alexander, MD (Radiology Privileges) 2. Kristine Andrade, MD (Radiology Privileges) 3. David Atkins, MD (Radiology Privileges) 4. Tariq Balawi, MD (Radiology Privileges)	Commissioner Coppock made a motion to approve the Medical Privileging as presented and Commissioner McMahan seconded. The motion passed unanimously.	

ACTION

OWNER

DUE DATE

AGENDA

DISCUSSION

5. Andrew Bauer, MD (Radiology Privileges) Telestroke/Neurology Consulting Privileges 1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing departments. Board Committee
(Radiology Privileges) Telestroke/Neurology Consulting Privileges 1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight Accounting & Purchasing Accounting & Purchasing Accounting and purchasing departments.
(Radiology Privileges) Telestroke/Neurology Consulting Privileges 1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight Accounting & Purchasing Accounting & Purchasing Accounting and purchasing departments.
Telestroke/Neurology Consulting Privileges 1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight Accounting & Purchasing Accounting & Purchasing Accounting and purchasing departments.
Consulting Privileges 1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing departments.
Consulting Privileges 1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing departments.
1. Pratik Bhattacharya, MD (Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight Accounting & Purchasing Accounting & Purchasing Accounting departments.
(Consulting Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing departments.
Telestroke/Neurology Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight Accounting & Purchasing Accounting & Purchasing Accounting departments.
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Privileges) 2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing departments.
2. Theodore Lowenkopf, MD (Consulting Telestroke/Neurology Privileges) Department Spotlight Accounting & Purchasing Purchasing Purchasing Accounting
(Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing (Consulting Telestroke/Neurology Privileges) Controller Scogin shared insight into the accounting and purchasing departments.
(Consulting Telestroke/Neurology Privileges) Department Spotlight • Accounting & Purchasing & Purchasing (Consulting Telestroke/Neurology Privileges) Controller Scogin shared insight into the accounting and purchasing departments.
Telestroke/Neurology Privileges) Department Spotlight Accounting Purchasing Accounting Accountin
Privileges) Department Spotlight Accounting & Purchasing Privileges Controller Scogin shared insight into the accounting and purchasing departments.
Department Spotlight • Accounting & Purchasing Controller Scogin shared insight into the accounting and purchasing departments.
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Accounting into the accounting and purchasing departments. Accounting into the accounting and purchasing departments.
& Purchasing departments.
Doard Committee Foundation Manager Scogn Shared
Reports the Mommy Shower has
Hospital transformed into the New Parent
Foundation Fair which will take place in March.
Report The Fund A Need this year will be
for EKG Machines for all three
clinics and the theme for 2022 will
be Queen of Hearts.
• Finance Commissioner McMahan provided
Committee updates regarding legislation, letters
Report from DZA to the whole board and
supporting approval of Resolution
22-07-an unforgiven portion of the
PPP disaster funding, as well as
Resolution 22-08 for repurposing
the existing bank account from
custodial trust to FSA.
Compliance Commissioner Richardson provided
Committee updates regarding completing a
Report 2021 risk assessment and a 2022
compliance workplan is in the
works for the March board meeting.
Consent Agenda Board Chair Herrin announced the Secretary Olive made
consent agenda items for a motion to approve
consideration of approval: the Consent Agenda
1. Approval of Minutes and Commissioner
a. January 26, 2022 Coppock
Regular Board seconded. The
Meeting motion passed
b. February 2, 2022 unanimously.
QIO Committee
Meeting 02.25.22

AGENDA

DISCUSSION

OWNER

ACTION

DUE DATE

AGENDA

DISCUSSION

OWNER

ACTION

DUE DATE

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	August of 2022 to not impact the election. 2. Remove the three districts and then all positions would be at large. The Board is able to remove the districts by resolution; however, if the Board wanted to recreate the three Districts, it would have to be voter approved.			
	The Board requested more information on this topic from AWPHD and will review again at the March Board Meeting.	Add Redistricting to Old Business at the next meeting.	Executive Assistant Garcia	03.30.22 Regular Board Meeting
	Matthew encouraged the Board to review their motivation on redistricting and will email the link to the Redistricting webinar for further review.	Review webinar and information from AWPHD prior to the next meeting.	Board of Commissioners	03.30.22 Regular Board Meeting
Incident Command Update	CNO/CQO Williamson noted the omicron variant has peaked, the WA State mask mandate is expiring March 21, 2022 for most indoor facilities except healthcare and elective surgeries are back on track.			
NW Momentum Accountable Care Organization (ACO)-Year 2	Superintendent Everett noted no new updates other than the prior escrow projection may change because they are now reviewing actual files and claims to get a better prediction. Projecting a resolution in March for payment in April.	Add Resolution for NW Momentum Accountable Care Organization-Year 2 to Old Business at the next meeting.	Executive Assistant Garcia	03.30.22 Regular Board Meeting
New Business • PDC Filing Reminder	Board Chair Herrin reminded the Board to complete their PDC filing by April 1, 2022.	Complete PDC filing	Board of Commissioners	04.01.22
Superintendent Report	Superintendent Everett presented the final 2021 department specific measures. Of the 46 goals, 19 of them were achieved for the year. Based on the actual performance, \$110,046.21 will be paid to the ten employees that were eligible for the 2021 performance. Superintendent Everett proposed	McMahan made a		
	repurposing the \$128,229 that was			02.25.22

	accrued as at-risk compensation to a retention bonus for all eligible employees. This will be the third retention bonus. The amount was already expensed in 2021 and would not result in any additional costs.	Create Resolution 22- 09 and send for electronic signature.	Executive Assistant Garcia	
	The Board fully supported approving the resolution given the following reasons: 1. Retention and retaining talent are important, 2. Monies were in the 2021 budget, 3. Staff need to feel appreciated and valued, 4. Staff are going above and beyond during trying times, and			
Meeting Summary &	5. Keeping morale up. Superintendent Everett highlighted			
Evaluation	the decisions made and action items.			
	Commissioner McMahan shared while he understood that Superintendent Everett needed to leave for the airport, he felt rushed on topics and requested more time at future meetings.			
Adjournment	Secretary Olive moved and Commissioner Coppock seconded to adjourn the meeting at 5:53 p.m. The motion passed unanimously.			
Respectfully submitted,				
Kim Olive, Secretary			Date	



LEWIS COUNTY HOSPITAL DISTRICT NO. 1 QUALITY IMPROVEMENT OVERSIGHT MEETING March 9, 2022 at 7:00 a.m. ZOOM

<u>Mission Statement</u> To foster trust and nurture a healthy community.

<u>Vision Statement</u> To provide accessible, quality healthcare.

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
Call to Order Roll Call Reading the Mission & Vision Statements	Commissioner Coppock called the meeting to order via Zoom at 7:00 a.m. Present in Person or via ZOOM ⊠:			

Approval or Amendment of Agenda		Dr. Preston made a motion to approve the agenda and Ancillary Services Director Taylor seconded. The motion passed unanimously.		
Conflicts of Interest	The Committee noted none.			
Guest Speaker	Patti Kehoe presented the following: 1. There were no organ referrals made in 2021. There is a possible referral under review from February. 2. In 2021, there was an overall timely tissue referral rate of 76% (45 tissue referrals). For 2022, the Hospital is currently at a 67% tissue referral rate. 3. Identified the triggers for timely referrals and more often than not Arbor Health will transport a critical patient but can still play a role.			
Committee Reports	CNO/CQO Williamson noted Medical Executive Committee (MEC) met to review privileging and are recommending approval by the Board. Also, recommending board approval for appointing Julie Taylor as the Antimicrobial Stewardship Program Manager. The QIO Committee supported the appointment and will recommend approval at the Board level in Consent Agenda.	The QIO Committee supported requesting the Board's approval of a resolution at the Regular Board Meeting.	Executive Assistant Garcia	03.30.22 Regular Board Meeting
Consent Agenda • Approval of Minutes	Approval of the following: 1. January 12, 2022 QAPI Workgroup Meeting 2. February 2, 2022 Quality Improvement Oversight (QIO) Committee Meeting 3. February 9, 2022 QAPI Workgroup Meeting	CNO/CQO Williamson made a motion to approve the consent agenda and Dr. Gary Preston seconded. The motion passed unanimously.		

AGENDA

DISCUSSION

OWNER

ACTION

DUE DATE

Old Business • 2021 QAPI QIO Dashboard • 2021 QAPI	Quality Manager Allen noted 53 measures were tracked and of those 37 are meeting the goal and 8 are below the goal. There 8 measures are in the red that are continually being monitored. Quality Manager Allen shared-we will continue to monitor the measures in red and will report progress in 2022. Quality Manager Allen noted 32			
Department Specific PI Summary Report	measures were tracked and of those 10 are meeting the goal and 16 are below the goal. There are 6 measures in the red that are continually being monitored. Of the 16 below the goal 10 of the measures are PI's carrying over into 2022. Quality Manager Allen noted five in the red are carrying over and one has been escalated.			
Regulatory & Accreditation Report	Quality Manager Allen identified the 2021 CAH Findings where the Hospital received a Non-Conformity (NC). An NC means inconsistent evidence to meet the standard. Quality Manager Allen noted the team has met compliance for several of the findings, meaning we have met the requirements and continue to monitor moving forward.			
New Business • Lucidoc Document Management	Quality Manager Allen presented the following for review: I. Documents to be Reviewed: a. Annual CAH Evaluation The QIO Committee supported approving the document presented and will recommend approval at the Board level in Consent Agenda under Approving Documents Pending Board Ratification.	Ancillary Services Director made a motion to approve the documents presented. CFO Boggess seconded, and the motion passed unanimously. The QIO Committee supported requesting the Board's approval in Consent Agenda under Approving Documents Pending Board Ratification.	Executive Assistant Garcia	03.30.22 Regular Board Meeting
COVID-19 Incident	CNO/CQO Williamson noted a decline in cases in Lewis County. The omicron variant presence has			

ACTION

AGENDA

DISCUSSION

DUE DATE

OWNER

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
Command	decreased too. There are a few			
Update	items under review; opening up the			
•	gift shop and café as well as			
	revisiting the visitor policy.			
 Environment 	Quality Manager Allen noted the			
of Care	committee is in transition of			
(EOC)	leadership, so we are behind on			
Committee	Quarter 1. Plan to be back on track			
	in Quarter 2.			
SHIP Grant	Quality Manager Allen noted the			
Monies	District is receiving the SHIP Grant			
	again this year. The use of these			
	funds from last year was slated for a			
	camera for wound care. We must			
	utilize the money by May 31, 2022.			
	This camera would interface with			
	Cerner, will improve patient care			
	and create general workflow efficiencies. This grant is just one			
	of the benefits of being a part of			
	The Rural Collaborative (TRC).			
Meeting Summary &	Quality Manager Allen provided a			
Evaluation	summary.			
Adjournment	Superintendent Everett moved and			
-	Commissioner Richardson			
	seconded to adjourn at 8:00 a.m.			
	The motion passed unanimously.			



LEWIS COUNTY HOSPITAL DISTRICT NO. 1 Finance Committee Meeting March 16, 2022, at 12:00 p.m. Via Zoom

Mission Statement To foster trust and nurture a healthy community.

<u>Vision Statement</u> To provide accessible, quality healthcare.

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
		T	T	
Call to Order	Commissioner McMahan called the			
Roll Call	meeting to order via Zoom at 12:03			
Reading the Mission & Vision Statements	p.m.			
& Vision Statements	Commissioner(s) Present in Person or			
	via Zoom:			
	⊠ Wes McMahan, Commissioner			
	⊠ Kim Olive, Secretary			
	Committee Member(s) Present in			
	Person or via Zoom:			
	☐ Richard Boggess, CFO			
	☐ Leianne Everett, Superintendent			
	☑ Marc Fisher, Community Member			
	⊠ Clint Scogin, Controller			
	☐ Sherry Sofich, Revenue Cycle			
	Director			
	⊠ Sara Williamson, CNO/CQO			
	⊠ Diane Markham,			
	Marketing/Communications Manager			
	☑ Julie Taylor, Ancillary Services			
	Director			
Approval or	CFO Boggess requested to add Bonds	CFO Boggess made a		
Amendment of	and Cerner WA Domain as agenda	motion to approve the		
Agenda	topics in New Business.	amended agenda and		
		Secretary Olive		
		seconded. The		
		motion passed unanimously.		
		unammousty.		

Conflicts of Interest	Commissioner McMahan asked the Committee to state any conflicts of	None noted.		
Old Business • Financial Department Spotlight- Marketing & Communicati	interest with today's amended agenda. Commissioner McMahan announced the following in consent agenda up for approval: 1. Review of Finance Minutes – February 16, 2022 2. Revenue Cycle Update 3. Board Oversight Activities 4. Financial Statements-February Marketing/Communications Manager Markham provided insight on the planning method used to market the service lines of the District. "Building a brand takes time and funding and is often hard to measure," said Manager	CFO Boggess made a motion to approve the consent agenda and Community Member Fisher seconded. The motion passed unanimously.		
ons	Markham. She reviewed the 4-year department income statement noting that costs have risen as the District has applied more resources to the program activities.			
Medicaid RHS Rate Change	CFO Boggess noted the new rates that were published end of 2021. Payors are making progress with adjudicating 2021 claims and are paying 2022 claims at the new rate. Continue to expect positive cash flow for the next month on 2021 claims.			
NW Momentum Accountable Care Organization (ACO)	CFO Boggess noted no new information regarding the estimate escrow fee of \$258,748. The Finance Committee continues to support the escrow payment and will recommend approval at the Board level in Consent Agenda. CFO Boggess reviewed the 2021 dashboard outlining the performance	The Finance Committee supported requesting the Board's approval of a resolution for the escrow fee at the Regular Board Meeting.	Executive Assistant Garcia	03.30.22 Regular Board Meeting
New Business	of the program. The group is in a positive position and there will be shared savings, but we do not know the extent yet. CFO Boggess noted:	The Finance	Executive	03.30.22 Regular
Bonds	1. The 2012 UTGO Bond's final principal payment is December 2022 which means the levy will expire too.	Committee supported requesting the Board's approval of a resolution for a consultant at the	Assistant Garcia	Board Meeting

ACTION

OWNER

DUE DATE

AGENDA

DISCUSSION

AGENDA	DISCUSSION	ACTION	OWNER	DUEDATE
• Cerner WA Domain	2. The Board agreed at the end of 2021 to take the steps towards replacing the bond. The Board's desire was to maintain the taxing level and replace the Bond. These monies are designated towards long life assets. 3. Lewis County has been notified of the Board's interest in moving forward down this path which would include engaging a consultant and there would be associated costs. The Finance Committee continues to support taking the steps to move forward with taking a new bond and accompanying levy to vote and will recommend approval at the Board level to engage a consultant. CFO Boggess noted the Hospital today is part of a domain which includes 50 plus hospitals and is difficult to customize the Electronic Health Record (EHR) system. The District has the option to join the Washington Domain, which would be less hospitals to remain flexible and have the option to customize to meet patient care needs. The remaining life of the Cerner contract is nine years ending in November of 2031. The District will request that Cerner spread the costs of transition over the remaining life of the contract, which would break the annual costs to an estimated \$125,000/year. Superintendent Everett noted by moving forward with this domain, the Hospital should experience improved workflows and patient safety, along with efficiencies which leads to staff satisfaction. The Finance Committee supported the Budget Amendment for the Cerner WA Domain monies and will	Regular Board Meeting. The Finance Committee supported requesting the Board's approval of a resolution for the budget amendment at the Regular Board Meeting.	Executive Assistant Garcia	03.30.22 Regular Board Meeting

AGENDA

DISCUSSION

OWNER

ACTION

DUE DATE

	recommend approval at the Board			
	level.			
 Right to 	CFO Boggess discussed the purpose			
Use/Leasing	of this standard which is to provide			
Standard and	more information to the readers of the			
Financial	financial statements about the assets			
Reporting	that organization has access to use and			
Requirement				
	Expect to see a new Asset section and			
	a Liability section with wording about			
	"Lease" or lease obligation.			
 Financial 	CFO Boggess discussed the different			
Packet	reports available in the finance packet			
	and their purpose. CFO Boggess			
	offered if the Commissioners want a			
	deeper dive to schedule time to review			
	further.			
 Surplus or 	CFO Boggess presented the list of	The Finance	Executive	03.30.22 Regular
Dispose of	assets for surplus.	Committee supported	Assistant Garcia	Board Meeting

ACTION

Board's approval of a resolution of the Surplus at the Regular Board Meeting.

requesting the

OWNER

DUE DATE

DISCUSSION

CFO Boggess highlighted the decisions

made and the action items that need to be taken to the entire board for

Commissioner McMahan adjourned

the meeting at 1:04 pm.

approval.

AGENDA

Certain Property

Meeting Summary &

Evaluation

Adjournment



LEWIS COUNTY HOSPITAL DISTRICT NO. 1 SPECIAL BOARD OF COMMISSIONERS' MEETING March 21, 2022 at 3:30 p.m.

ZOOM

https://myarborhealth.zoom.us/j/85880462608

Meeting ID: 858 8046 2608

One tap mobile: +12532158782,,85880462608#

Dial: +1 253 215 8782

Mission Statement

To foster trust and nurture a healthy community.

Vision Statement

To provide accessible, quality healthcare.

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
Call to Order	Secretary Olive called the meeting			
Roll Call	via Zoom to order at 3:36 p.m.			
Reading the Mission				
& Vision Statements	Commissioners present:			
	⊠ Kim Olive, Secretary			
	□ Laura Richardson			
	⊠ Wes McMahan			
	⊠ Craig Coppock			
	Erang Coppock			
	Others present:			
	☑ Leianne Everett, Superintendent			
	 ⊠ Shana Garcia, Executive 			
	Assistant			
	⊠ Kurt O'Brien, Kurt O'Brien			
Conflicts of Interest	Consulting, LLC	None noted.		
Conflicts of Interest		None noted.		
	l			
Danding of the Notice	, ,			
_	board meeting notice.			
	Kurt O'Brien presented on Ruilding			
1 0				
Reading of the Notice of the Special Meeting Old Business Developing a High Functioning & Effective Board-Part 2	Secretary Olive asked the Board to state any conflicts of interest with today's agenda. Secretary Olive read the special board meeting notice. Kurt O'Brien presented on <i>Building New Habits for Communicating</i> . The Board selected a principle to work on weekly until the next Special Board Meeting on April 18,	None noted.		

AGENDA	DISCUSSION	ACTION	OWNER	DUE DATE
	2022. Kurt requested the Board to act on these principles and be practicing them to become better at them each week. The selections were as follows: 1. Board Chair Herrin-Suspend Judgement 2. Commissioner Richardson-Separate Intent from Impact 3. Commissioner Coppock-Listening 4. Secretary Olive-Suspend Judgement 5. Commissioner McMahan-Listening 6. Superintendent Everett-Attribute Positive Intent Kurt paired the group for weekly 15–30-minute check-ins as follows: 1. Group 1-Board Chair Herrin & Commissioner Richardson 2. Group 2-Secretary Olive & Commissioner McMahan 3. Group 3-Commissioner Coppock & Superintendent Everett	Schedule weekly check-ins.	Board of Commissioners & Superintendent Everett	03.26.22
Adjournment	Secretary Olive moved and Commissioner McMahan seconded to adjourned at 5:03 p.m. The motion passed unanimously.			
Respectfully subr	mitted,			

Some Basic Principles of Dialogue

Definition: "a shared inquiry, a way of thinking and reflecting together." It offers the possibility of making meaningful connections with one another.

Establish Mutual Purpose	This is all about finding common ground; it is the starting point for dialogue.
Listening	Listening is at the heart of dialogue. It requires creating a quiet space with yourself, slowing down and temporarily turning off your own thoughts (opinions, ideas, prejudices, impulses) to consider another's ideas, thoughts, opinions. See "Suspending", below.
Respecting	"At its core, the act of respect invites us to see others as legitimate" It is especially important when there are deep polarizations and different positions.
Empathy	Strong emotions signal unmet needs. The purpose of empathy is to acknowledge the feeling and understand the unmet need.
Suspend Judgment	Suspending judgment means listening without resistance. It requires remaining open to new information, new perspectives and different points of view. It is not about suppressing or disregarding our own beliefs or perspectives, nor is it about rigidly defending our point of view. When we suspend we ask ourselves, "What can I learn from this?"
Attribute Positive Intent	We assume that people have both their own and other's best interests at heart. This means asking ourselves what kind of intent we're attributing to the other person – positive or negative – and recognizing that we have a choice in attributing this intent.
Separate Intent from Impact	Acknowledge that sometimes, even though we may be operating from a place of good intent, our actions can be have a negative, or even hurtful impact on others.
Balance Advocacy & Inquiry	Advocacy is speaking what you think, speaking for a point of view. Most conversations are dominated by advocacy. Especially under pressure, we resort to unilateral advocacy of our positions. Advocate with a willingness to be wrong. Inquiry is exploring different ways of seeing something – seeking to discover something new. It involves asking genuine questions to understand. Tip: Advocate in ways that make it safe for others to respond; inquire in ways that make it safe for others to share.

WARRANT & EFT LISTING NO. 2022-02 We, the undersigned Lewis County Hospital District No. 1 Commissioners, do hereby certify RECORD OF CLAIMS ALLOWED BY THE that the merchandise or services hereinafter **BOARD OF LEWIS COUNTY** specified has been received and that total COMMISSIONERS Warrants and EFT's are approved for payment in the amount of The following vouchers have been audited, \$3,914,787.84 this <u>30th</u> day charged to the proper account, and are within the budget appropriation. of March 2022 **CERTIFICATION** I, the undersigned, do hereby certify, under penalty of perjury, that the materials have been Board Chair, Tom Herrin furnished, as described herein, and that the claim is a just, due and unpaid obligation against LEWIS COUNTY HOSPITAL DISTRICT NO. 1 Secretary, Kim Olive and that I am authorized to authenticate and certify said claim. Commissioner, Wes McMahan Signed: Commissioner, Craig Coppock Richard Boggess, CFO Commissioner, Laura Richardson

SEE WARRANT & EFT REGISTER in the amount of \$3,914,787.84 dated February 1, 2022 – February 28, 2022.

Routine A/P Runs

Warrant No.	Date	Amount	Description
124443 - 124456	7-Feb-2022	129, 119. 07	CHECK RUN
124457 - 124515	4-Feb-2022	241, 174. 57	CHECK RUN
124516 - 124599	11-Feb-2022	257, 533. 59	CHECK RUN
124600 - 124617	14-Feb-2022	783, 230. 56	CHECK RUN
124618 - 124619	1-Feb-2022	7, 592. 63	CHECK RUN
124620	8-Feb-2022	11. 26	CHECK RUN
124621	15-Feb-2022	103. 11	CHECK RUN
124622 - 124660	18-Feb-2022	26, 793. 81	CHECK RUN
124661	18-Feb-2022	1, 009. 82	CHECK RUN
124662 - 124688	22-Feb-2022	358, 045. 96	CHECK RUN
124689 - 124699	18-Feb-2022	3, 004. 20	CHECK RUN
124700 - 124701	18-Feb-2022	650. 76	CHECK RUN
124702	18-Feb-2022	1, 360. 48	CHECK RUN
124703 - 124758	18-Feb-2022	107, 448. 62	CHECK RUN
124759	17-Feb-2022	3, 706. 31	CHECK RUN
124760	22-Feb-2022	3.09	CHECK RUN
124761 - 124805	25-Feb-2022	107, 010. 56	CHECK RUN
124806 - 124820	25-Feb-2022	675, 744. 26	CHECK RUN
124831 - 124832	28-Feb-2022	20, 802. 54	CHECK RUN
Total - Check Runs		\$ 2,724,345.20	

Error Corrections - in Check Register Order

Ziroi corrections in	.02		
Warrant No.	DATE VOIDED	Amount	Description
124154	17-Feb-2022	(129. 30)	VOID
123213 -123217	11-Feb-2022	(20, 365. 13)	VOID
121257	17-Feb-2022	(48. 45)	VOID
124514	17-Feb-2022	(130. 05)	VOID
123423	11-Feb-2022	(193. 26)	VOID
TOTAL - VOIDED CHE	CKS	\$ (20, 866. 19)	

COLUMBIA BANK CHECKS, EFT'S & VOIDS	\$ 2,703,479.01
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Eft	Date	Amount	Description
PAYROLL	7-Feb-22	440, 635. 80	PAYROLL
1163	7-Feb-2022	173, 418. 36	IRS
1164	18-Feb-2022	167, 556. 55	IRS
1116	16-Feb-2022	631.00	PART B REFUNDS
PAYROLL	18-Feb-2022	429, 067. 12	PAYROLL
TOTAL EFTS AT SECURITY STATE BANK		\$ 1, 211, 308.83	

TOTAL	CHECKS,	EFT'S,	&TRANSFERS
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<u>LEWIS COUNTY HOSPITAL DISTRICT NO. 1</u> <u>MORTON, WASHINGTON</u>

RESOLUTION APPOINTING DNV ACCREDITATION-ANTIMICROBIAL STEWARDSHIP PROGRAM MGR

RESOLUTION NO. 22-10

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,

NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital District No. 1 as follows:

To appoint Julie Taylor as the Antimicrobial Stewardship Program Manager.
(DNV NIAHO IC.2, SR.1a)

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 30th day of March 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair	Kim Olive, Secretary		
Wes McMahan, Commissioner	Craig Coppock, Commissioner		
Laura Richardson, Commissioner	_		



Specialty Clinic 360-496-3641

Mossyrock Clinic 521 ADAMS AVENUE 745 WILLIAMS STREET 360-983-8990

Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital 521 ADAMS AVENUE 360-496-5112

Morton Clinic 531 ADAMS AVENUE 360-496-5145

To: Pharmacy and Therapeutics, Medical Staff, QIO & Board of Commissioners From: Dr. Gary Preston, Epidemiologist & Leianne Everett, Superintendent

Date: 2/3/2022

Subject: DNV Accreditation-Antimicrobial Stewardship Program Manager

In preparation for our ongoing DNV accreditation, I am asking you, via a motion of the Pharmacy and Therapeutics Committee, to recommend board approval on the following appointment:

1. Julie Taylor to serve as Arbor Health's Antimicrobial Stewardship Program Manager. This appointment is to fulfill DNV's NIAHO accreditation requirement IC.2, SR.1a (an individual(s) who is qualified through education, training, experience or certification in infectious diseases and/or antibiotic stewardship, is appointed by the governing body as the leader(s) of the antibiotic stewardship program.



Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital **521 ADAMS AVENUE** 360-496-5112

Morton Clinic 531 ADAMS AVENUE 360-496-5145

To: Board of Commissioners

From: Leianne Everett, Superintendent

Date: 3/23/2022

Subject: Approving the NW Momentum ACO – Year 2 Escrow Funding

In follow-up to our January 26, 2022, board meeting we discussed the Year 2 escrow payment for our participation in the NW Momentum ACO. The purpose of this memo is to approve a resolution for an escrow payment of \$167,514.42. This amount is reduced from the initial payment discussed of \$258,748.

Arbor Health is one of seven hospitals from The Rural Collaborative (TRC) that are entering into a second year of participation. We have seen shared savings from Year 1's collective performance. This shared savings will not result in a cash distribution to Arbor Health until 2023, once the claim's processing window has expired. While it is too soon to predict the distribution amount, it should offset most of the Year 2 escrow funding.

The escrow payment due date has been extended from 3/30/2022 to 4/30/2022; however, to prevent a position of possible delinquency I am requesting approval now for funding.







<u>LEWIS COUNTY HOSPITAL DISTRICT NO. 1</u> <u>MORTON, WASHINGTON</u>

RESOLUTION APPROVING THE NW MOMENTUM ACCOUNTABLE CARE ORGANIZATION (ACO)-YEAR 2 ESCROW FUNDING

RESOLUTION NO. 22-11

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,
NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital
District No. 1 as follows:

To approve the escrow funding for the NW Momentum ACO from operating cash. The escrow payment is \$167,514.42.

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 30th day of March 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair	Kim Olive, Secretary		
Wes McMahan, Commissioner	Craig Coppock, Commissioner	_	
Laura Richardson, Commissioner			





Invoice

#INV473

03/23/2022

Physicians of Southwest Washington, LLC 319 7th Avenue SE Suite 201 Olympia WA 98501 United States

Bill ToArbor Health
521 Adams Ave
Morton WA 98356
United States

TOTAL

\$167,514.42

Due Date:

Terms	Due Date	PO #	
Qty	Item	Rate	Amount
1	Escrow Funding 2022 Direct Contracting Escrow	\$167,514.42	\$167,514.42
		Subtotal	\$167,514.42
		Total	\$167,514.42
		Outstanding Balance	



<u>LEWIS COUNTY HOSPITAL DISTRICT NO. 1</u> <u>MORTON, WASHINGTON</u>

RESOLUTION DECLARING TO SURPLUS OR DISPOSE OF CERTAIN PROPERTY

RESOLUTION NO. 22-12

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,

NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital

District No. 1 as follows:

That the equipment and supplies listed on Exhibit A, attached hereto and by this reference incorporated herein, are hereby determined to be no longer required for hospital purposes. The Administrator is hereby authorized to surplus, dispose and/or trade in of said property upon such terms and conditions as are in the best interest of the District.

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 30th day of March 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair	Kim Olive, Secretary		
Wes McMahan, Commissioner	Craig Coppock, Commissioner		
Laura Richardson, Commissioner			

DISPOSAL/SURPLUS PERSONAL PROPERTY

EXHIBIT A

DATE	DESCRIPTION	DEPARTMENT	PROPERTY#	DISPOSITION	REASON
02/2022	PFT Machine	Respiratory Therapy	001871	DISPOSAL/SURPLUS	No longer
					useful to
					department
					needs.
02/2022	Vizio TV	Maintenance	5537	Disposal/Surplus	Obsolete
02/2022	Oxygen	Maintenance	1796	Disposal/Surplus	Obsolete
	Manifold				

	Documents Awaiting Board Ratification 03.30.22						
	LCHD No. 1's Policies, Procedures						
	& Plans:	Departments:					
	Non-Clinical Policy Review Committee	·					
1	Charter	Administration					
	F15: Associate Guidelines: Infection						
2	Prevention and Control Practices	Dietary Services					
3	F1: Hand Hygiene	Dietary Services					
	Employee/Occupational Health						
4	Manual	Employee Health & Wellness					
5	Provider Signature Requirements	Health Information Management					
	COVID-19 Mandatory Vaccination &						
6	Accommodation	Human Resources					
7	Electronic User Account Requests	Information Technology					
8	Acute Stroke Ready Program	Nursing Department					
9	Crash Cart Checks/Exchange Process	Nursing Department					
10	Medication: Security of	Nursing Department					
11	Antimicrobial Stewardship	Pharmacy					
	Automated Drug Dispensing Device						
12	for Medication Administration	Pharmacy					
13	Heparin	Pharmacy					
	Medications: Destruction Of						
	Defective, Outdated, And Non-						
14	Returnable	Pharmacy					
	Nicardipine (Cardene) Drip Protocol	Pharmacy					
	Patient Home Medication	Pharmacy					
	Pharmacy Access	Pharmacy					
	Blood Glucose Monitoring	Point of Care Testing					
19	Annual CAH Evaluation	Quality					
	Patient Grievance or Complaint						
20	Management	Quality					
	District Constitution of Constitution						
Physical/Occupational/Speech		Dahahilitatian Caminas					
	Therapy Services in Hospital Facility	Rehabilitation Services					
		Sleep Center					
	Fitting Patient Interfaces	Sleep Center					
		Sleep Center					
	MSLT/MWT montage	Sleep Center					
26	Oxygen Titration	Sleep Center					
27	Dationt Proporation for Class Study	Slaan Contor					
	Patient Preparation for Sleep Study	Sleep Center					

28	Polysomnography Report Parameters	Sleep Center
29	Risk Assessment/Analysis	Sleep Center
30	Sleep Lab Director	Sleep Center
31	Swallow Evaluations	Speech & Language Pathology

In order to access the above documents you will need to log into Lucidoc. Once you have logged into Lucidoc, on the top toolbar click "My Meetings" and select the upcoming QIO meeting date that's highlighted in green to see the agenda with documents needing to be approved. You are able to view the documents once in the agenda. If the date is highlighted in yellow that means the agenda has not been released yet.

OLD BUSINESS



<u>LEWIS COUNTY HOSPITAL DISTRICT NO. 1</u> <u>MORTON, WASHINGTON</u>

RESOLUTION ADOPTING THE 2022 COMPLIANCE WORKPLAN

RESOLUTION NO. 22-13

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,

NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital District No. 1 as follows:

Adopting the 2022 Compliance Workplan.

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 30th day of March 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair	Kim Olive, Secretary
Wes McMahan, Commissioner	Craig Coppock, Commissioner
Laura Richardson, Commissioner	-



INTRODUCTION

The objective of Lewis County Hospital District No. 1's (LCHD No. 1) Compliance Program (Compliance) is to continuously re-assess risk areas, re-prioritize compliance projects that are most critical to the mission of LCHD No. 1, and report compliance developments and compliance audit findings to the Compliance Committee, the Chief Executive Officer, and the full Board of Commissioners as appropriate.

The 2022 Compliance Workplan briefly describes the various project areas that we perceive as critical to the mission of LCHD No. 1. The Workplan was developed by identifying risk areas, internally and externally, to LCHD No. 1, as well as reviewing the United States Department of Health and Human Services, Office of Inspector General (HHS OIG) Workplan and annual Health Care Fraud and Abuse Control Program Report, Washington State Health Care Authority Division of Program Integrity's (HCA DPI) FY 2021-year end required annual training, and several other external resources. Some of these resources include OIG, State and Centers for Medicare & Medicaid Services (CMS) guidance documents, enforcement settlements and various industry publications. The planning process is ongoing and dynamic; therefore, the focus and timing of many of these projects may be altered in response to new information, new issues, and shifting priorities of LCHD No. 1.

The audits identified in the 2022 Compliance Workplan will be performed in areas that Compliance has reviewed in the past and also will include new audit topics not previously reviewed. The scope of this Work Plan includes LCHD No.1's hospital and clinics. Preliminary interview meetings with certain departments to discuss other possible areas for audit also are included. If necessary, audits will be scheduled later in the year.

Further, the 2022 Compliance Workplan includes a number of non-coding initiatives that will be performed. Some of the initiatives include correctly placing patient to inpatient or observation statuses, writing off revenue due to no ABN, COVID effects on staffing, vendor compliance with vaccine mandate, major IT security breach, ensuring registration staff have appropriate Cerner access for job duties, state/federal vaccine mandates and employee accommodations.

2022 Compliance Workplan and Initiatives Schedule:

Key 2022 Auditing & Monitoring Activities

	Compliance Coding & Documentation Audit Categories	Q1	Q2	Q3	Q4
1	Orders/INPT & OBS stays	Χ		Χ	
2	Vaccine for children's program		Χ		
3	Reduce bundling issue denials				X
4	Medical Records- Release of Information			Х	
5	PARA external review		Χ		
	-Include review of last MSP audit				



Key 2022 Non-Coding/Documentation Compliance Initiatives

		Q1	Q2	Q3	Q4
1	Correctly placing patients to inpatient or observation statuses	Х	Х		
2	Writing off revenue due to no ABN	Х	Х	Х	Х
3	COVID effects on staffing, competencies, burnout, patient care, and outcomes	Х	Х	Х	Х
4	Vendor compliance with vaccine mandates	Х	Х		
5	Major IT security breach	Х	Х		
6	Ensuring registration staff have appropriate Cerner access for job duties	Х			
7	State/Federal vaccine mandates and employee accommodations	Х	Х	Х	Х



Attachment A- Compliance Committee Annual Action Schedule



2022 COMPLIANCE COMMITTEE ACTION SCHEDULE

	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
A an N (e	thysician Signature attestation Log udit Io Surprise Billing effective 1/1) tark Law Update effective 1/1) annual disclosure o OCR of eportable events	 Annual Commissioner review and signatures for Conflict of Interest and Code of Ethics 	 Training: DNV Plan of Correction Update Requirement to Contract with Public Option Plans Compliance Clinical Contract Reviews 	 Annual managers review and signatures for Conflicts of Interest Security Awareness-Phishing Q1 Audit: INPT/OBS Orders RA#1: INPT/OBS RA#2: Write-offs/No ABN RA#3: COVID Effects RA#4: Vendor vax RA#5: IT security RA#6: Reg. Cerner RA#7: Vax Mandate Q1 Workplan Update to Committee & Board 	 Training: Clinics 2022 WA Legislative Session Summary Charity Care Law Update (HB1616, tentatively effective 7/1) 	 Training: Nursing 2021 SRA Findings Status Update

JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
 Q2 Audit: Vaccines for Children Program Q2 Audit: PARA external review RA#1: INPT/OBS RA#2: Write-offs/No ABN RA#3: COVID Effects RA#4: Vendor vax RA#5: IT security RA#7: Vax Mandate Q2 Workplan Update to Board 	■ Training: Business Office	 Annual SRA Requirement to Contract with Public Option Plans 	 Q3 Audit: INPT/OBS Orders Q3 Audit: Medical Records ROI RA#2: Write-offs/No ABN RA#3: COVID Effects RA#7: Vax Mandate Q3 Workplan Update to Board SB 5761- Wage and salary information to applicants (tentatively effect 1/1/2023) 	 Notifiable Conditions Law Update (effective 1/1/23) Hospital Transparency & Reporting (effective 1/1/23) Corporate Compliance & Ethics Week 	 Q4 Audit: Reduce bundling issues denials PARA annual charge master review Charity Care/Financial Assistance Review Annual Risk Assessment & 2023 Workplan

NEW BUSINESS



Specialty Clinic 521 ADAMS AVENUE 360-496-3641 Mossyrock Clinic 745 WILLIAMS STREET 360-983-8990 Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital 521 ADAMS AVENUE 360-496-5112 Morton Clinic 531 ADAMS AVENUE 360-496-5145

MEMORANDUM

To: Board of Commissioners

From: Richard Boggess, CFO

Date: March 20, 2022

Re: Bond & Levy Discussion

The District will extinguish the 2012 Bond in December of this year. As a result, the Levy that supports the debt service on the Bond will end too. Administration has started the discussion with various stakeholders regarding establishing a replacement bond that will be serviced by maintaining the current levy amount. This bond is classified as an Unlimited Tax General Obligation (UTGO). UTGO bonds (also called voted debt) must be approved by 60% of the voters, with a voter turnout equal to at least 40% of those who voted in the most recent general election. When the voters are being asked to approve the issuance of these bonds, they are simultaneously asked to approve an excess levy which raises their property taxes to cover the debt service payments. UTGO bonds can be used only for capital purposes. Replacement of equipment is not a permitted use (RCW 84.52.056). The cost of issuance is usually included in the bond amount.

There are two remaining dates in 2022 that the District could file for a levy on.

Election Type	Election Date	Filing Deadline	
Primary Election Date	Aug 2, 2022	May 13, 2022	
General Election Date	Nov 8, 2022	Aug 2, 2022	

Administration has contacted the County Treasure to discuss the process. Treasurer Arny Davis referred the District to Pacifica Law Group who can function as Bond Counsel and lead the District through the process. The District has historically sought counsel related to the bonds from Brad Berg at Foster Peppers, now Foster Garvey. Pacifica Law Group is awaiting the Districts decision on engagement. Meanwhile they will provide a list of possible financial consultants to assist the District with analysis about the bond amounts and types of assets that will be listed. As describe above, all proceeds must be used to purchase new assets. This fits well with advancing the District's Mission in Packwood. A limited conversation with Pacifica indicates that the District could issue the bonds in a series after getting the voters' approval. This series would match with the Districts uses of the funds. Pacifica also indicated that the District has three years from issuances to utilize the funds.

The purpose of this memo is to request the Board's approval to engage bond counsel and a financial consultant that can assist the District with planning for the issuance of the bond and levy.



<u>LEWIS COUNTY HOSPITAL DISTRICT NO. 1</u> <u>MORTON, WASHINGTON</u>

RESOLUTION APPROVING TO ENGAGE BOND COUNSEL & FINANCIAL CONSULTANT

RESOLUTION NO. 22-14

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,

NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital District No. 1 as follows:

Approving to engage bond counsel and a financial consultant.

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 30th day of March 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair	Kim Olive, Secretary
Wes McMahan, Commissioner	Craig Coppock, Commissioner
Laura Richardson, Commissioner	



Specialty Clinic 521 ADAMS AVENUE 360-496-3641 Mossyrock Clinic 745 WILLIAMS STREET 360-983-8990 Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital 521 ADAMS AVENUE 360-496-5112 Morton Clinic 531 ADAMS AVENUE 360-496-5145

MEMORANDUM

To: Board of Commissioners

From: Richard Boggess, CFO

Date: March 20, 2022

Re: Budget Amendment-Cerner (EHR) Transition to WA Domain

The purpose of this memo is to share the current situation with Cerner's Electronic Health Record (EHR) and related conditions leading to a discussion about moving to the Washington Domain. In November 2014, Arbor Health (AH) entered into an agreement with Cerner Corporation, whereby Cerner would provide an EHR to AH. Cerner created the EHR on Domain C of Cerner hosted environment in Kansas City. AH shares this domain with no less than 40 different health systems across the United States. Cerner provides all EHR management activities of the domain including user security and data protection activities. In 2019, AH renewed its contract with Cerner for a period of ten years ending in November 2031. From time to time, AH desires to make changes that could improve the workflow process of the organization; however, cannot make these changes because the change would result in a "global change" that would impact the other users of the domain possibly disrupting their workflows. Therefore, AH has not be able to change certain process that could provide for a more user-friendly working environment for staff and physicians. Mason Health (MH) has documented that Domain C has certain design flaws that lead to various inconsistency within the operating structure. This is most noticeable in the reporting process of the domain and in workflows for staff members.

MH in 2019 began planning for a "Washington Domain" where the domain could manage for the best outcome of hospitals specifically in the state of Washington. Their desire is to limit the domain to less than 20 health systems, all with the similar data requirements for state reporting and operational improvement activities. In 2021, MH went live with this domain and has now started inviting other organizations to join them. They have started with organizations in The Rural Collaborative, such as AH and Skyline Hospital. MH has offered access to a population health tool, Healthe-Intent, as an incentive to join the WA Domain. AH has had a preliminary discussion with MH's CMO and CIO about moving this direction. Our next step is the have Cerner develop a budget to support a transition plan to move AH from Domain C to the WA Domain. As a proxy for estimating the cost, Skyline has taken this step and has costs around \$1,000,000. Cerner is providing flexible terms such as allowing Skyline to spread this investment across the remain term of its contract. Expecting that Cerner would extend the similar terms to AH and pricing is comparable, the following could be negotiated. Expecting that transition started in Q3 of 2022 and professional service fees of \$1,000,000 spread across the remaining term of 113 months, we would expect an increase in our Cerner



Specialty Clinic 360-496-3641

Mossyrock Clinic 521 ADAMS AVENUE 745 WILLIAMS STREET 360-983-8990

Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital 521 ADAMS AVENUE 360-496-5112

Morton Clinic 531 ADAMS AVENUE 360-496-5145

cost of \$8,850 per month or \$106,200 per year. The purpose of this memo is to request the Board's approval for a budget amendment of \$53,100 for the 2022 calendar year covering the last 6 months of the year.



<u>LEWIS COUNTY HOSPITAL DISTRICT NO. 1</u> <u>MORTON, WASHINGTON</u>

RESOLUTION APPROVING THE BUDGET AMENDMENT-CERNER (EHR) TRANSITION TO WA DOMAIN

RESOLUTION NO. 22-15

WHEREAS, the Lewis County Hospital District No. 1 owns and operates Arbor Health, a 25-bed Critical Access Hospital located in Morton, Washington, and;

WHEREAS, the Lewis County Hospital District No. 1 feel that this is worthy,

NOW, THEREFORE, BE IT RESOLVED by the Commissioners of Lewis County Hospital

District No. 1 as follows:

Approving the budget amendment to transition the current Electronic Health Record (EHR) to Cerner's Washington Domain which is not included in the District 2022 Budget by RES 21-39 on November 29, 2021.

ADOPTED and APPROVED by the Commissioners of Lewis County Hospital District No. 1 in an open public meeting thereof held in compliance with the requirements of the Open Public Meetings Act this 30th day of March 2022, the following commissioners being present and voting in favor of this resolution.

Tom Herrin, Board Chair	Kim Olive, Secretary		
Wes McMahan, Commissioner	Craig Coppock, Commissioner		
Laura Richardson Commissioner			

Lewis County Hospital District No. 1 (d/b/a Arbor Health) 2022 Budget Amendment Request Form

When requesting a Budget Amendment, this form MUST be completed and filed with the CFO Office to be placed on the next agenda of the Board of Commissioners. If request is for outside consultant, please complete ATTACHMENT A with this request.

RECOMMENDATION:

Increase the Cerner department budget by \$53,100. This amount is spread evenly across the last 6 months of the year 2022.

JUSTIFICATION:

This is the 2022 estimated cost to begin the transition to the Washington domain hosted by Cerner and managed by Mason Health. See the Board Memo regarding the transition cost.

BUDGET CONSIDERATION:

There is no budget offset. The new cost is within the definition of Medicare and Medicaid allowable cost and will be included in the cost report both this year and future years. The amount will be placed in the Purchase Services – Contracted Services Account.

<u>Richard Boggess</u> <u>2/11/2022</u> Chief Financial Officer Date

For Accounting Use:

On this day of March 30, 2022 the following budget request has been approved thus amending the District 2022 Budget by Board of Commissioners. BUDGET AMENDMENT No: Budget Amendment #2, \$53,1000 and Cerner Department Operating Budget.

Lewis County Hospital District #1 Income Statement CY 2022 Budget as Amended

	CY 2022 As approved Dec 2021	Change	Cerner EMR Transition to WA Domain	CY 2022 Budget As Amended
-	Approved	Approved	Proposed	
Inpatient Revenenue	9,210,076			9,210,076
Outpatient Revenues	37,250,067			37,250,067
Clinic Revenues	6,367,089			6,367,089
Total Gross Patient Revenues	52,827,232			52,827,232
Contractual Allowanc	16,667,773			16,667,773
Bad Debt	657,415			657,415
Indigent Care	23,822			23,822
Other Adjustments	0			
Total Deductions From Reven	17,349,010			17,349,010
Net Patient Revenues	35,478,222			35,478,222
NPSR %	67%			67%
Other Operating Revenue	982,805			982,805
Total Operating Revenue	36,461,027			36,461,027
Operating Expenses				
Salaries & Compensa	21,491,914	277,000		21,768,914
Benefits	5,185,314	46,000		5,231,314
Professional Fees	1,496,047	302,000		1,798,047
Supplies	2,413,129			2,413,129
Purchases Services	4,687,248		53,100	4,740,348
Utilities	546,621			546,621
Insurance Expense	267,252			267,252
Depreciation and Am	1,276,519			1,276,519
Interest Expense	422,436			422,436
Other Expense	696,525			696,525
Total Operating Expenses	38,483,006	625,000		39,108,006
Income (Loss) From Operation	(2,021,979)	(625,000)		(2,646,979)
Non-Operating Revenue/Expe	1,650,795			1,650,795
Net Gain (Loss)		(625,000)		(996,184)
Net Income Margin ¾	-1.0%	To increase the Emergency	To begin to transition to WA Cerner Domain	-2.7%

SUPERINTENDENT REPORT



SUPERINTENDENT'S REPORT March 2022

<u>Mission:</u> To foster trust and nurture a healthy community

<u>Vision:</u> To provide accessible, quality healthcare

	Opportunity	CY 2022 Progress	Status	Associated Documentation
Strategic	Plant Planning	Proposing the cancellation of the 04/06/2022 meeting.	Complete	03232022 Plant Planning Meeting Memo
Education	In-Person & Virtual	WSHA Leadership Summit May 15-17, 2022	Complete	o3232022 Board Education Opportunity Memo
Strategic	Veterans	Advocacy work for veterans seeking care within our district	on-going	03232022 Veterans Living In Our District Memo
Regulatory	2022 Legislative Update	Providing an update on the 2022 legislation session	Complete	03232022 2022 Legislation Update
Education	5/16/2022 Board Training & Education	Verbal discussion about rescheduling or foregoing the 5/16/2022 training via special board meeting due to WSHA Leadership Summit	Complete	None



Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital 521 ADAMS AVENUE 360-496-5112

Morton Clinic 531 ADAMS AVENUE 360-496-5145

To: Board of Commissioners

From: Leianne Everett, Superintendent

Date: 03.23.2022

Subject: Plant Planning Committee

I am proposing we cancel the April 6, 2022, Plant Planning Committee meeting for the following reasons:

- 1. This committee is required to meet a minimum of once per year. The April 6th meeting was scheduled to provide some structure; however, the frequency of meetings tends to be ad hoc when major projects are not underway.
- 2. Due to turnover in our Facilities Director position, our new Facilities Director Matthew Lindstrom will not start until March 28, 2022. The April 6th date is too soon for Facilities Director Lindstrom to be able to present an informed opinion.

Unless something occurs that necessitates an ad hoc meeting, I propose that we provide Facilities Director Lindstrom with a minimum of 90 days to settle into his position. This means that the earliest non-urgent meeting would be in July 2022.







Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital 521 ADAMS AVENUE 360-496-5112

Morton Clinic 531 ADAMS AVENUE 360-496-5145

To: Board of Commissioners

From: Leianne Everett, Superintendent

Date: 03.23.2022

Subject: Board Education Opportunity

WSHA is hosting their 2022 Leadership Summit on May 15-17, 2022, in Walla Walla, WA. This event offers both in-person, as well as virtual options. Please see the Schedule of Events below.

Please come to the March 30, 2022, Board meeting prepared to respond to your preference of in-person attendance, virtual attendance, or not attending this event.

WSHA Leadership Summit

May 15 @ 5:00 pm - May 17 @ 1:00 pm



(http://www.ws ha.org/wpcontent/upload s/WSHA_Leader shipSummit_We bBanner.png)

2022 WSHA Leadership Summit – In Person or Virtual

- Audience: CEO, CMO, CNO, CQO, Safety & Quality Leaders, Trustees & Commissioners
- Participants can earn up to four credit hours towards their WSHA & AWPHD Health Care Governance certification or recertification.
- Session Topics: Executive Leadership Skills for Resilient Organizations, Health Equity in Washington State, The Board's Role in Leading a Culture of Safety,

Schedule of Events

SUNDAY, MAY 15

5:00-7:00 pm – Welcome Reception [In Person Only]

MONDAY, MAY 16

9:00 am - A State of the Union from WSHA CEO - Cassie Sauer

10:00 am – The Board's Role in Leading a Culture of Safety – Gary Yates, MD

12:00 pm – Networking Lunch

1:00 pm – Executive Leadership Skills for Resilient Organizations – Tejal Gandhi, MD, MPH 4:00 pm - Adjourn

6:00 pm - Winery Dinner, Yellowhawk Resort [In Person Only] TUESDAY, MAY 17

9:00 am - Health Equity in Washington State - Edwin Lindo

11:00 am - Lunch

12:00 pm – Workforce Wellbeing – Nicole Lipkin

1:00 pm - Adjourn







Randle Clinic 108 KINDLE ROAD 360-497-3333

Morton Hospital **521 ADAMS AVENUE** 360-496-5112

Morton Clinic 531 ADAMS AVENUE 360-496-5145

To: Board of Commissioners

From: Leianne Everett, Superintendent

Date: 03.23.2022

Subject: Veterans Living in our District

On March 10, 2022, I attended a virtual meeting with legislators and local representatives to hear the concerns from veterans about the lack of access to care after the closing of the Centralia/Chehalis VA Clinic. Attendees included staff from Senators Murray & Cantwell's offices, County Commissioners Fund and Grose, and local veterans.

Commissioner Grose saw an opportunity for Arbor Health to hear concerns and provide feedback; therefore, invited me to join. This was an opportunity that I was grateful to have been a participant.

I shared that Arbor Health was willing and had capacity to provide care to veterans that reside in our district. I encouraged legislators to advocate for VA reform. The current VA process is burdensome to veterans, as well as to non-VA healthcare providers. Typically, VA provides a limited scope of approval for services to be provided outside of the VA system. This limited scope frequently results in non-VA providers expending significant time working through the VA system for additional approval for care that is within the scope of primary care. I further advocated that healthcare's staffing crisis will certainly make VA's administrative burdens unsustainable for non-VA providers.

Additionally, I learned that VA has promised veterans in East Lewis County that a mobile clinic will be provided. To date, the mobile clinic has not materialized.

This information is being provide so that you are aware of the conversations in which Arbor Health is participating. The March 5, 2022, edition of *The Chronicle* covered this topic on their front page. You may have community members asking questions about veterans getting care at one of our facilities.







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To: Board of Commissioners

From: Leianne Everett, Superintendent

Date: 03.23.2022

Subject: 2022 Legislative Update

Our 2022 sixty-day legislative session has ended. Below is a partial list of bills. Many of those that did not pass are expected to return with support in 2023.

DID NOT PASS:

- HB 1868-Hospital Staffing Bill—required strict nurse/CAN ratios. This bill also limited scheduled on-call. Uninterrupted meals/rest breaks would not have exceptions due to clinical circumstances.
- HB 174—Provider Contracting—this would have restricted hospital contracting, giving payers more leverage in negotiations.
- HB 2083—Consent to Long-term Care Placement—proposed to clarify state law, allowing surrogate decision makers to consent to long-term care placement.

DID PASS:

- **HB 1616—Charity Care**—expanded charity care eligibility. Applies to care provided after 7/1/2022. Arbor Health will provide free care to applicants with income up to 200% of federal poverty guidelines (FPG). A 75% discount will be provided for those within 201-205% of FPG. A 50% discount will be available to those within 251-300% of FPG.
- SB 5736—Behavioral Services for Minors—starting 1/1/2024, provides Medicaid coverage for partial hospitalization and intensive outpatient treatment for children's behavioral health.
- HB 1821—Audio-only Telemedicine—allows for reimbursement for audio-only care for established patients through 2024.
- o **HB 1761**—allows nurses to provide opioid reversal medication.
- HB 1779—requires hospitals to have smoke evacuation equipment for planned surgical procedures by 2024-2025.

Funding was allocated to the following areas:

- Healthcare workforce education & pipeline (\$50 million).
 - Adds 220 nursing slots in 2023 and 270 thereafter.
 - RN-to-BSN & MSN programs at WWU.







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- Grants for simulation labs.
- Graduate nursing student loan repayment for nurse educators.
- 10 DOH FTEs to expedite nurse license processing (7 days or less)
- Difficult to Discharge (\$549 million)
 - Incentive payments to long-term care facilities for accepting patients discharging from hospitals.
 - o Short-term & long-term funding for guardianship slots for low-income patients.
 - o Incentive payments for LTC beds for patients with complex health needs.
 - Overall Medicaid rate increase for LTC.
- Behavioral Health (\$261 million)
 - o Partial hospitalization/intensive outpatient treatment pilot expansion.
 - Strategic plan for children and youth.
 - o 7% increase in community behavioral health Medicaid payment rates.
- Washington Medical Coordinating Center (\$1.3 million).



